VPTO/SB/30 (10-01)

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REQUEST

FOR

CONTINUED EXAMINATION (RCE)
TRANSMITTAL

Address to:
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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application Number	09/427,263		
Filing Date	October 26, 1999		
First Named Inventor	Richard H. Harvey		
Art Unit	2162		
Examiner Name	Shahid Al Alam		
Attorney Docket Number	063170.6269		

This is a Request for Continued Examination (RCE) under 37 C.F.R. 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. Submission required under 37 C.F.R. § 1.114					
a. 🛛 Previ	a. 🛛 Previously submitted				
i. 🖂	Consider the amendment(s)/reply under 3	37 C.F.R. 1.	116 previously filed or	n <u>September</u>	
21/2005					
	(Any unentered amendment(s) referred to above will be ent	ered).	Daine annuing also eilead a		
ii. 📙	Consider the arguments in the Appeal Bri	et or Reply	Brief previously filed of	on	
iii. 🔲	Other				
b. 🔲 Enclo		. –		-4(IDC)	
			rmation Disclosure Sta		
ii. 🔲	Affidavit(s)/Declaration(s)	v. 📙 Oth	er		
2. Miscellane					
a. Suspension of action on the above-identified application is requested under 37 C.F.R. 1.103(c) for a					
perio	d ofmonths. (Period of suspension	shall not exceed	3 months; Fee under 37 C.F.R	i. 1.117(i) required)	
	b.				
3. Fees The RCE fee under 37 C.F.R. 1.17(e) is required by 37 C.F.R 1.114 when the RCE is filed.					
a. 🖾 The	Director is hereby authorized to charge	any fees i	ncluding any extens	ion fees or credits	
a. The Director is hereby authorized to charge any fees including any extension fees or credits or overpayments to Deposit Account No. 02-0384					
i. RCE fee required under 37 C.F.R. 1.17(e) 10/25/2005 HDESTA1 00000078 020384 09427263					
ii.					
b. ☐ Check in the amount of \$ enclosed (See 3.a)					
	nent by credit card (Form PTO-2038 enclosed)	4 (000 0.4)			
C. L Fayii	NING: Information on this form may be	come publi	ic. Credit card inform	nation should not	
he in	cluded on this form. Provide credit care	d informati	on and authorization	on PTO-2038.	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
		Dogistes	ties No. (Attornou/Accest)	41.617	
Name (Print /	Type) Samir A. Bhaysar	Registra	tion No. (Attorney/Agent)	41,617	
0: 1	1. 1/12	Doto	October 21, 2005		
Signature	//am///	Date	October 21, 2005		
CERTIFICATE OF MAILING OR TRANSMISSION					
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail					
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Name (Print	r rype)		<u> </u>		
Signature		Date			

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